132				MODIFIED PTO/SE	3/50 (06-0	
REISSUE PATENT APPLICATION TRANSMITTAL						
U.S.	Attorney Docket No.			Q78314) (O)	
Address to: MAIL STOP REISSUE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	First Named Inventor			TOKORO, Hisato	102	
	Original Patent Number		r	6,312,494	2//0	
	Original Patent Issue Date (Month/Day/Year)			November 6, 2001		
	Express Mail Label No.).			
APPLICATION FOR REISSUE OF: (Check applicable box) Utility F				Design Patent	nt	
APPLICATION ELEMENTS (37 CFR 1.173)			ACCOMPANYING APPLICATION PARTS			
1. ☑ Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing) 2. ☐ Applicant claims small entity status. See 37 CFR 1.27. 3. ☑ Specification and Claims in double column copy of patent format (amended, if appropriate) 4. ☑ Drawing(s) (proposed amendments, if appropriate) 5. ☐ Reissue Oath/Declaration (original or copy) (37 C.F.R. 1.175)(PTO/SB/51 or 52) 6. ☐ Power of Attorney 7. Original U.S. Patent currently assigned? (if Yes, check applicable box(es)) ☐ Yes ☐ No ☐ Written Consent of All Assignees (PTO/SB/53) ☐ 37 CFR 3.73(b) Statement (PTO/SB/96) 8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table 9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary) a. ☐ Computer Readable Form (CFR)		10.	Statement of status and support for all changes to the claims. See 37 CFR 1.173(c). Original Patent Grant Ribboned Original Patent Grant Statement of Loss (PTO/SB/55) Foreign Priority Claim (35 USC 119)(if applicable) Information Disclosure Statement (IDS)/PTO/SB/08 A & B (modified) Copies of IDS Citations English Translation of Reissue Oath/Declaration (if applicable) Preliminary Amendment Return Receipt Postcard (MPEP 503)(Should be specifically itemized)			
 b. Specification Sequence Listing on: i. CD-ROM (2 copies) or CD-R (2 copies); or 						
ii. Paper c. Statements verifying identify of above copies						
18. CORRESPONDENCE ADDRESS						
Direct all correspondence to the address for SUGHRUE MION, PLLC filed under the Customer Number listed below: WASHINGTON OFFICE 23373 CUSTOMER NUMBER						

Name (Print/Type) Peter D. Olexy Registration No. (Attorney/Agent) 24,513

Signature Date November 5, 2003

REISSUE APPLICATION FEE TRANSMITTAL FORM Docket Number Q78314 Claims as Filed - Part 1 Number Filed (3) Small Entity Claims in Other than a Small Entity Number in Reissue Patent Rate Fee Rate Fee Application Extra **Total Claims** **** 0 (A) (B) 14 \$ OR х = x \$ 0 (37 CFR 1.16(j)) Independent (C) Claims (D) 7 * 0 = Х \$ x \$ 0 (37 CFR 1.16(i)) Basic Fee (37 CFR 1.16(h)) \$ OR Total Filing Fee \$770.00 Claims as Amended - Part 2 (1) (2) (3) Small Entity Other than a Small Entity Claims Highest Extra Remaining Number Rate Fee Rate Claims After Previously Present Amendment Paid For OR Total Claims ***14 MINUS **20 \$ Х = Х \$ = 0 (37 CFR 1.16(j)) 0 Independent *** 7 Claims MINUS *****7 =0 \$ x \$ 0 = (37 CFR 1.16(i)) Total Additional Fee OR \$0 *If the entry in (D) is less than the entry in (C), Write "0" in column 3. **If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space. ***After any cancellation of claims. **** If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20). ***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). ☐ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of \$770.00 to cover the filing/additional fee is enclosed. A duplicate copy of this sheet is enclosed. The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account. Nov 5 2003 # 24513 Signature of Applicant, Attorney or Agent of Record PETER D. OLEXY Typed or printed name